IAP12 Rec'd PCT/PTO 18 JA Approved for use through 01/31/2008. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 10/505,145 Filing Date TRANSMITTAL April 8, 2005 First Named Inventor **FORM** Steven Peter Colliver Art Unit 1638 **Examiner Name** R. Kallis (to be used for all correspondence after initial filing) Attorney Docket Number 056159-5241 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC ✓ Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers of Appeals and Interferences Fee Attached Appeal Communication to TC ✓ Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please Identify Terminal Disclaimer below): Extension of Time Request Postcard Request for Refund **Express Abandonment Request** CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Morgan Lewis & Bockius LLP Signature gelest frugter Printed name Robert Smyth

CERTIFICATE OF TRANSMISSION/MAILING

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January 18, 2008

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50,801

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Fees was an to the Consolidate BASS periations Act, 2005 (H.R. 4818	,	Complete if Known		
		10/505,145		
FEE TRANSMITTAL	Filing Date	April 8, 2005		
For FY 2008	First Named Inventor	Steven Peter Colliver		
Applicant claims small entity status. See 37 CFR 1.27	Examiner Name	R. Kallis		
	Art Unit	1638		
TOTAL AMOUNT OF PAYMENT (\$) 370.00	Attorney Docket No.	056159-5241		
METHOD OF PAYMENT (check all that apply)				
Check Credit Card Money Order None Other (please identify):				
Deposit Account Deposit Account Number: 50-0310 Deposit Account Name: Morgan Lewis & Bockius				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
✓ Charge fee(s) indicated below     Charge fee(s) indicated below, except for the filing fee				
☐ Charge any additional fee(s) or underpayments of fee(s) ☐ Credit any overpayments				
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card				
Information and authorization on PTO-2038.				
FEE CALCULATION				
1. BASIC FILING, SEARCH, AND EXAMINATION FEE	S			
FILING FEES SE		MINATION FEES		
Small Entity Application Type Fee (\$) Fee (\$)	Small Entity e (\$) Fee (\$) Fee	Small Entity (\$) Fee (\$)	Fees Paid (\$)	
Utility 310 155 51	0 255 21	0 105		
Design 210 105 10	0 50 13	0 65 -		
Plant 210 105 31	0 155 16	0 80	<u>.</u>	
Reissue 310 155 51	0 255 62	0 310 -	·····	
Provisional 210 105	0 0	0 0 -		
2. EXCESS CLAIM FEES Small Entity				
Fee Description Fee (\$) Fee (\$)				
Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)		210	105	
Multiple dependent claims		370	185	
	Fee Paid (\$)	Multiple Depen	1	
	0	Fee (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.		370.00	370.00	
	Fee Paid (\$) ()			
2 3 or HP =0x210 =0 HP = highest number of independent claims paid for, if greater than 3.				
3 APPLICATION SIZE EEE				
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer				
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).				
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)				
100 = / 50 = (round up to a whole number) x =				
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)				
Other (e.g., late filing surcharge):				
SUBMITTED BY				
Signature 1 1 1 1 1 1 1 1	Registration No. 50 004	Telephone 20	2 730 3000	

Signature were they 50,801 (Attorney/Agent) Date January 18, 2008 Name (Print/Type) Robert Smyth

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